

Sheet 1 of 2

FORM PTO-1449 (REV. 7-80)	U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE	ATTY. DOCKET NO. KAS-185	SERIAL NO. 10/603,624
LIST OF DOCUMENTS CITED BY APPLICANT (Use several sheets if necessary)		APPLICANT S. MATSUBARA et al	
		FILING DATE June 26, 2003	GROUP

U.S. PATENT DOCUMENTS

* EXAMINER INITIAL	DOCUMENT	DATE	NAME	CLASS	SUBCLASS	FILING DATE (If Appropriate)
ML	AA 5,314,825	5/24/94	Weyrauch et al			
	AB					
	AC					
	AD					
	AE					
	AF					
	AG					
	AH					
	AI					
	AJ					
	AK					

FOREIGN PATENT DOCUMENTS

	DOCUMENT	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
						YES	NO
ML	AL 0952452	10/27/99	EP			<input type="checkbox"/>	<input type="checkbox"/>
J	AM 0359049	3/21/90	EP			<input type="checkbox"/>	<input type="checkbox"/>
J	AN 0732591	9/18/96	EP			<input type="checkbox"/>	<input type="checkbox"/>
J	AO 0871034	10/14/98	EP			<input type="checkbox"/>	<input type="checkbox"/>
ML	AP 1061372	12/20/00	EP			<input type="checkbox"/>	<input type="checkbox"/>

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, etc.)

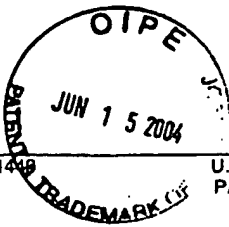
	AR	
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EXAMINER

DATE CONSIDERED

08/19/08

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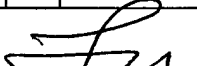
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	AB					
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	AH					
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	AJ					
	AK					

FOREIGN PATENT DOCUMENTS

	DOCUMENT	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
						YES	NO
M	AL 9-211003	8/15/97	JP (with English Abstract)			<input type="checkbox"/>	<input type="checkbox"/>
M	AM 8-101204	4/16/96	JP (with English Abstract)			<input type="checkbox"/>	<input type="checkbox"/>
	AN					<input type="checkbox"/>	<input type="checkbox"/>
	AO					<input type="checkbox"/>	<input type="checkbox"/>
	AP					<input type="checkbox"/>	<input type="checkbox"/>

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, etc.)

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EXAMINER 	DATE CONSIDERED 08/19/05
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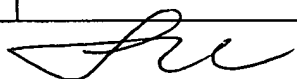
FOREIGN PATENT DOCUMENTS

		DOCUMENT	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
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M	AL	8-101204	04/16/96	Japan			<input type="checkbox"/>	<input type="checkbox"/>
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	AO						<input type="checkbox"/>	<input type="checkbox"/>
	AP						<input type="checkbox"/>	<input type="checkbox"/>

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